## Notice of Section 527 Status

OMB No. 1545-1693

	rtment of the Treasury				
_	rt I General Information				
1	Name of organization			En	nployer identification number
	Reelection Fund of Joanne Raje				22 3712325
2	Mailing address (P.O. Box or number, street, and room or suite number) c/o L.J. Wolgin, 502 Centennial Ave				
	City or town, state, and ZIP code Cranford, NJ 07016				
3	E-mail address of organization PhilWolgin@AOL.com				
4a	Name of custodian of records	46	Custodian's addres	s	
	L.J. Wolgin		502 Centennial	Ave, Cranford, NJ 07016	
5a	Name of contact person	5b	Contact person's a	ddress	
	L.J. Wolgin		· ·	Ave, Cranford, NJ 07016	
6	Business address of organization (if o	l different from mailing	address shown abov	re). Number, street, and room	n or suite number
	City or town, state, and ZIP code	· •	······································	· · · · · · · · · · · · · · · · · · ·	
Par	rt II Purpose				-
7	Describe the purpose of the organiza	tion			
	Provide for the financing of a p	olitical candidate	for County office In	n Union County, NJ	
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••••			***************************************	•••••	***************************************
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	It III List of All Related Ent Name of related entity	ities (see instruc 8b Relationship			
oa	Name of related entity	ob Relationship	8c Addre		JED IN CORP.
					VED IN CORRES RG-060+583
				Ju	<b>IL 3 0</b> 2000
					DEN, UTAH
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Part IV List of All Officer  9a Name	rs, Directors, and Highly 9b Title	y Compensated Employees (see instructions)  9c Address
<b>Ja</b> Name	9D Tide	
Joanne Rajoppi	Chairperson	383 Plymouth Rd, Union, NJ 07083
Lawrence J. Wolgin	Treasurer	502 Centennial Ave, Cranford, NJ 07016
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Under penalties of perjury Revenue Code, and that I it is true, correct, and con	have examined this notice, including	med in Part I is to be treated as an organization described in selection 527 of the Internal ig accompanying achedules and statements, and to the best of my know ledge and belief
Sign Signature of autho	Caly	7. 28.00
Here Signature of autho	rized official	Date